## Remarks

Status of the Claims

Claims 1-20 and 22-37 were are pending in the application and stand rejected. By this paper, claims 25, 34 and 35 have been amended, claims 38-45 have been added, and claims 1-19 have been cancelled without prejudice or disclaimer. For the reasons set forth below, Applicants submit that each of the pending claims is patentably distinct from the cited prior art and in condition for allowance. Reconsideration of the claims is therefore respectfully requested.

Claim Rejections – 35 U.S.C. § 102

Claims 1-5, 25 and 27 stand rejected under 35 U.S.C. § 102(e) as being allegedly anticipated by U.S. Patent No. 6,602,191 issued to Quy ("Quy"), and claims 35-36 stand rejected under 35 U.S.C. § 102(b) as being allegedly anticipated by U.S. Patent No. 5,974,389 issued to Clark et al. ("Clark"). As set forth below, Applicants respectfully traverse these rejections because Quy and Clark fail to identically teach every element of the pending claims. See M.P.E.P. § 2131 (stating that in order to anticipate a claim, a prior art reference must identically teach every element of the claim).

In particular, the none of the cited references teach or suggest controlling access to a medical patient's information by requiring a first user to access the information before a second user is permitted to access the information. For example, paragraph [0031] on page 13 of the application states that access control as shown in Figure 5 of the application "advantageously requires 158, 160 that Physician 1 access data in the

database ***before*** access will be permitted by Nurse 1 at 146 or by Physician 2 at 144. (Such access control provides a significant level of security and safety for patient data, and can also be used to safeguard patient health both by ensuring that a proper regimen of treatment or observation is followed and by ensuring that medical personnel are properly supervised.)" Emphasis added.

Page 15 of the Office Action admits that "Quy fails to expressly teach controlled electronic access to the medical database by a plurality of entities in accordance with a specification provided by an authorized user." However, pages 15 and 16 of the Office Action asserts that column 2, lines 42-57 of Clark disclose "sequentially [controlling] said electronic access with respect to a patient's data so that at least a first predetermined entity must access the patient's data before a second predetermined entity is permitted access." However, Applicants respectfully disagree.

Clark controls access to a patient record database according to a set of access rules. Clark, col. 2, lines 42-48. However, the access rule referred to in the Office Action is concerned with providing access to "[o]nly one caregiver at a time." Col. 6, line 40. Col. 2, lines 49-57 state:

> Further in accordance with the present invention, the predetermined set of rules includes a rule that access to a predetermined portion of the patient data by a first caregiver is ***terminated before*** access to the same predetermined portion by a second caregiver is allowed.
>
> Still further in accordance with the present invention, the predetermined set of rules includes a rule arbitrating access to a portion of the patient data ***when more than one caregiver seeks access to the portion of the patient data***.

Emphasis added. Thus, Clark teaches that ***if*** a first caregiver accesses a predetermined portion of data, a second caregiver cannot access the predetermined

portion of data until the access of the first caregiver is ***terminated***. This requirement to allow access to only ***one caregiver at a time*** has nothing to do with requiring a particular user to access the data in the first place. Clark provides no teaching or suggestion that the first caregiver must access the information before the second caregiver.

In particular, the cited references do not teach or suggest "wherein the network is configured to ***sequentially*** control said electronic access with respect to a patient's data so that at least a first predetermined entity ***must access*** the patient's data before a second predetermined entity is permitted access," as required, among other things, in claim 20. Emphasis added. Rather, the Clark is completely silent as to the subject matter of claim 20.

Further, the cited references do not teach or suggest "defining a first sequence of authorized access to the patient monitored medical data, wherein at least a first user in the first sequence is ***required to access*** the patient monitored medical data ***before*** a second user in the first sequence is permitted to access the patient monitored medical data; and defining a second sequence of authorized access to a restricted portion of the patient monitored medical data," as required, among other things, in amended claim 25. Emphasis added.

The cited references also fail to teach or suggest "conditioning each further access to the patient data by additional entities upon a ***required prior access by at least one predetermined prior entity***," as recited, among other things, in amended claim 35. Emphasis added. Thus, Applicants respectfully request that the rejection of claims 20, 25 and 35 be withdrawn.

New Claims

New Claims 38-45 have been added to more fully define Applicants' invention and are believed to be fully distinguished over the prior art of record.

Conclusion

For at least the foregoing reasons, the cited prior art references, whether considered individually or in combination, fail to disclose each of the limitations in any of the pending independent claims. For at least the same reasons, each of the claims depending therefrom are also patentably distinct from the cited prior art.

In view of the foregoing, all pending claims represent patentable subject matter. A Notice of Allowance is respectfully requested.

Respectfully submitted,

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